

REFERENCE REQUEST—FEDERAL RECORDS CENTERS

NOTE: Use a separate form for each request.

SECTION I—TO BE COMPLETED BY REQUESTING AGENCY

ACCESSION NO.

AGENCY BOX NUMBER

RECORDS CENTER LOCATION NUMBER

OF

DESCRIPTION OF RECORD(S) OR INFORMATION REQUESTED

☐ BOX

☐ FOLDER (include file number and title)

REMARKS

NATURE OF SERVICE

☐ FURNISH COPY OF
RECORD(S) ONLY

☐ PERMANENT
WITHDRAWAL

☐ TEMPORARY
LOAN OF RECORD(S)

☐ REVIEW

☐ OTHER
(Specify)

SECTION II—FOR USE BY RECORDS CENTER

☐ RECORDS NOT IN CENTER CUSTODY ☐ RECORDS DESTROYED

☐ WRONG ACCESSION NUMBER—PLEASE RECHECK

☐ WRONG BOX NUMBER—PLEASE RECHECK

☐ WRONG CENTER LOCATION—PLEASE RECHECK

☐ ADDITIONAL INFORMATION REQUIRED TO IDENTIFY RECORDS
REQUESTED

☐ MISSING (Neither record(s), information nor charge card found in
container(s) specified)

☐ RECORDS PREVIOUSLY CHARGED OUT TO (Name, agency and date):

REMARKS

DATE

SERVICE

TIME
REQUIRED

SEARCHER'S
INITIALS

SECTION III—TO BE COMPLETED BY REQUESTING AGENCY

NAME OF REQUESTER

TELEPHONE NO.

☐ FTS

DATE

RECEIPT OF RECORDS

NAME AND
ADDRESS
OF AGENCY

(Include
street
address,
building,
room no.
and ZIP
Code)



Requester please sign, date and return this form, for
file item(s) listed above, ONLY if the block to right has
been checked by the Records Center.

☐

SIGNATURE

DATE